hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the ates Postal Service with sufficient postage as First Class Maillan envelope addressed to: Attention: BOX MISSING Assistant Commissioner for Patents, Washington, DC 20231 on JUNE 1, 2001

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Examiner:

To be assigned

MENON et al.

Art Unit:

2152

Serial No.

09/774,204

Filed:

January 29, 2001

Date:

June 1, 2001

For: Prefix Caching for Media Objects

NOTICE TO FILE CORRECTED APPLICATION PAPERS TRANSMITTAL

Box Missing Parts

Assistant Commissioner for Patents Washington, D.C. 20231

Dear Sir,

In reply to the Notice to File Corrected Application Papers mailed March 8, 2001. enclosed are the following items:

- Carbon copy of Form PTO-1533, Notice to File Corrected Application Papers [X]dated March 8, 2001;
- four (4) sheets of formal drawings to be substituted in place of the informal [X] drawings filed with this application;
- a one month Petition for Extension of Time to file our reply is hereby requested. [X] A check of \$55 for such extension is enclosed; and
- and our prepaid return postcard. [X]

The Commissioner is hereby authorized to charge any fees determined to be due to Deposit Account 06-1300 Order No. A-68437-1/RMA).

06/07/2001 GTEFFERA 00000127 09774204

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55.00 DP

Steven F. Caserza Reg. No. 29,780

Respectfully submitted,

Flehr Hohbach Test Albritton & Herbert Four Embarcadero Center, Suite 3400

San Francisco, CA 94111-4187 Telephone (650) 494-8700

Facsimile: (650) 494-8771

1029744

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 **CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY** TYPE Z SMALL ENTITY (Column 1) (Column 2) **TOTAL CLAIMS** RATE FEE RATE BASIC FEE 710.00 NUMBER FILED **NUMBER EXTRA** BASIC FEE 355.00 FOR OŖ 0 TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9= X\$18= OR INDEPENDENT CLAIMS minus 3 = X40= ルも X80= OR MULTIPLE DEPENDENT CLAIM PRESENT +270= +135= OR * If the difference in column 1 is less than-zero, enter "0" in column 2 TOTAL 'TOTAL' OR CLAIMS AS AMENDED - PART II OTHER THAN OR SMALL ENTITY **SMALL ENTITY** (Column 3) (Column 2) (Column 1) CLAIMS HIGHEST ADDI-ADDI-NUMBER 4 PRESENT REMAINING TIONAL TIONAL RATE RATE **AFTER** PREVIOUSLY **EXTRA** NDMENT FEE FEE PAID FOR **AMENDMENT** Minus X\$ 9= X\$18= Total OR 匝 Minus Independent X80= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM = +135= 270= 14. OR TOTA ADDIT, FEE ADDIT. FEE (Column 2) (Column 3) 4,50 (Column 1) HIGHES CLAIMS, ADDI-ADDI-REMAINING NUMBER PRESENT TIONAL TIONA RATE RATE PREVIOUSLY AFTER-**AMENDMENT EXTRA** FEE FEE PAID FOR AMENDMENT Total Minus X\$ 9= X\$18= OR Minus independent X40= X80≡ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR TOTAL TOTAL OR ADDIT. FEE ADDIT. FEE (Column 3) (Cölumn 1) (Column 2) CLAIMS HIGHEST ADDI-ADDI-C REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL **PREVIOUSLY AMENDMENT** AFTER **EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus X\$18= X\$ 9= OR Independent ' Minus X80= X40= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +270= +135= OR If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL OR " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE ADDIT, FEE ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

Application or Docket Number